



As we mark the twentieth anniversary of the discovery of the HIV and AIDS viruses, and with the new technologies of the 21st century, there still is no cure for this deadly disease. Now, AIDS has risen to the world's number one killer and we are desperately searching for a cure to this pandemic. Statistics show that AIDS, which was once considered as only a "gay white male" disease, is spreading at an incredible rate and has penetrated deep into the minority community.

The Indiana Commission on the Social Status of Black Males conducted a nine-city survey of HIV and AIDS in Indiana and research show that minorities, Black males in particular, are being exposed at alarming rates in Indiana. The survey also revealed that Black males are being infected with HIV and dying from AIDS complications in disproportionate numbers compared to the population statistics.

If Indiana is to fight this disease and reduce the number of new cases; it will take a broader strategy that includes state and local governments and private sectors. Appropriate funding will have to be applied to prevention, intervention and treatment components throughout Indiana starting at a grade school level.

Local communities, along with the support of state government, will have to ban together with one voice and teach the truth about AIDS. The idea of AIDS has to be transformed into a community issue and not only viewed as a worldwide problem. Families will have to lift the taboo sentiment applied to HIV and open a long awaited dialogue.

Involvement from all citizens will generate positive results in lowering the number of HIV and AIDS cases in Indiana, which will create a healthier and happier Indiana. All of this is another strategic step in positively uplifting Black male Hoosiers.

Dear Citizen:

The Indiana Commission for the Social Status of Black Males has stepped to the forefront of addressing the ongoing ravages of HIV/AIDS. The statistical realities of the disproportionate number of African-American males being positively diagnosed and the potential impact of this situation are devastating. The number of Indiana males affected with this deadly disease continues to increase.

In April 2001, we held a rally at the State House to call attention to those persons whose lives have been affected or claimed by this disease. The Commission continues its efforts with the publication of this report. While the information in this report may alarm you, it is published with the intent of sending a wake-up call to legislators, local government officials, community leaders, and the entire Hoosier community. The increase in the rates of diagnoses among Black males is a cause for our swift, serious, and committed action.

Attacking any problem must begin with the realization that there is a problem. Despite increased media campaigns against this disease, the Commission believes that our efforts must continue to be relentless. I hope that you will find that this information stirs you to join our efforts against this devastating disease.

Respectfully yours,

Dr. Vernon G. Smith
Chairman
Indiana Commission on the Social Status of Black Males

Dear Friends,

The Indiana Commission on the Social Status of Black Males is dedicated to the continued facilitation of information to the citizens of Indiana concerning the societal condition of Black Males. To this end, we have produced our first booklet addressing the issue of HIV and AIDS in the Black community. As this booklet suggests, there is some improvement in raising awareness, particularly surrounding the risk factors associated with HIV infection.

No longer can the Black population continue to allow the manifestation of lies, misinformation, stereotypes, and ignorance continue to plague our community as other ethnic groups experience a decline in the number of reported HIV and AIDS cases. As Spike Lee wrote in the movie *School Daze*, "WAKE UP". The survival of the Black community, and Indiana as a whole is dependent upon correct information being disseminated to the masses, so that informed decisions prevail and misinformation is destroyed. Thank you and please pass along the information contained within this booklet to everyone you know.

Sincerely,

Stephen M. Jackson
Executive Director
Indiana Commission on the Social Status of Black Males

Definition of HIV and AIDS*

HIV

Acronym for Human Immunodeficiency Virus, a pernicious infectious agent that attacks the immune system that leads to its progressive destruction. The virus is found in blood and genital fluids of the human body. The primary transmission is sexual, however HIV is also spread by the use of infected needles among intravenous drug users, by the exchange of infected blood products, from an infected mother to her fetus during pregnancy, and through breastmilk.

AIDS

Acronym for Acquired Immunodeficiency Syndrome, a fatal transmissible disorder of the immune system that is caused by the HIV. AIDS slowly attacks and destroys the immune system, leaving the infected individual vulnerable to malignancies and infections that eventually cause death. AIDS is the last stage of HIV infection.

*Source: Encyclopedia Britannica, Online Version, 2001

The Difference Between HIV and AIDS*

HIV is the term for the virus that damages the immune system and may eventually cripple the body's ability to fight disease. AIDS is the result of HIV infection. People who are infected with HIV are diagnosed as having AIDS if they develop certain serious diseases or conditions such as Pneumocystis carinii pneumonia (PCP), Kaposi's sarcoma (a rare cancer), HIV dementia, pulmonary tuberculosis, invasive cervical cancer, recurrent pneumonia, and others. Another indicator of AIDS is a positive HIV

antibody test and severe damage of the immune system (a low count or a low percentage of CD4 cells, which are important to the body's immune system).

There are many more people—up to 900,000 individuals—who are infected with HIV than have developed AIDS. Most people with HIV, who do not have AIDS, require health services; they may take the new drug therapies to avoid developing symptoms, and they may also take other medicines to prevent illness. Also, most infected people should have their immune systems regularly monitored by a health professional. However, even before the advent of effective therapies, some HIV-infected individuals lived 10 years or more without symptoms.

*Source: National Conference of State Legislatures

Some misunderstood phrases related to HIV:

<i>Misleading</i>	<i>More Accurate</i>
Infected with AIDS	HIV infection
AIDS virus	HIV (human immunodeficiency virus)
HIV virus	HIV
AIDS test	HIV antibody test
AIDS antibodies	HIV antibodies
Positive AIDS test	Positive test for HIV antibodies
AIDS transmission	HIV transmission
AIDS victim	PWA (person with AIDS) or PLWA (person living with AIDS)
High-risk groups	High-risk behaviors

Total Black Population by City				Total Black Population Living W/HIV		
	Total Population	Total Black Population	Total Black Population %	Total # Living W/HIV	of Total Living W/HIV	Black % of Total LivingW/HIV
Anderson	58,868	8,886	15.1%	45	13	28.9%
Evansville	119,913	13,275	11.1%	110	24	21.8%
Fort Wayne	201,073	35,752	17.8%	156	57	36.5%
Gary	100,985	86,340	85.5%	225	203	90.2%
Indianapolis	778,994	200,257	25.7%	1370	575	42.0%
Jeffersonville	26,822	3,742	14.0%	29	9	31.0%
Michigan City	32,125	8,657	26.9%	37	20	54.1%
Muncie	66,426	7,397	11.1%	57	16	28.1%
South Bend	104,768	26,522	25.3%	135	59	43.7%
Totals	1,489,974	390,828	26.2%	2,164	976	45.1%
*Denotes unknown quantities including zero		Source: United States Census 2000		Source: Indiana State Department of Health		
All State data is as of April 1, 2001						

Total & Black Population Living W/AIDS				Total & Black Population Died of Aids		
City	Total # Living W/AIDS	# Blacks Living W/AIDS	% Blacks Living W/AIDS	Total # Died of AIDS	# Blacks Died of AIDS	% Blacks Died of AIDS
Anderson	57	8	14.0%	51	5	9.8%
Evansville	90	12	13.3%	121	10	8.3%
Fort Wayne	118	28	23.7%	182	39	21.4%
Gary	137	120	87.6%	189	169	89.4%
Indianapolis	1,140	406	35.6%	1,491	444	29.8%
Jeffersonville	25	10	40.0%	21	*	N/A
Michigan City	39	22	56.4%	21	7	33.3%
Muncie	41	8	19.5%	49	*	N/A
South Bend	105	42	40.0%	135	43	31.9%
Totals	1,752	656	37.4%	2,260	717	31.7%

*Denotes unknown quantities including zero

Source: Indiana State Department of Health

All State data is as of April 1, 2001

Anderson

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	12	7	4
White Males	23	44	43
Other Males	0	*	*
Totals	35	51	47
Percentage that are Black Males	34.3%	13.7%	8.5%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	12	7	4
White Females	23	44	43
Other Females	0	*	*
Totals	35	51	47
Percentage that are Black Females	34.3%	13.7%	8.5%

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	12	7	4
Black Females	1	1	1
Totals	13	8	5
Percentage that are Black Males	92.3%	87.5%	80.0%

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Evansville

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	17	12	9
White Males	75	72	109
Other Males	0	*	*
Totals	92	84	118
Percentage that are Black Males	18.5%	14.3%	7.6%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	7	0	1
White Females	11	6	1
Other Females	0	*	*
Totals	18	6	2
Percentage that are Black Females	38.9%	0.0%	50.0%

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	17	12	9
Black Females	7	0	1
Totals	24	12	10
Percentage that are Black Males	70.8%	100.0%	90.0%

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Fort Wayne

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	40	19	35
White Males	83	80	129
Other Males	6	*	*
Totals	129	99	164
Percentage that are Black Males	31.1%	19.2%	21.3%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	17	9	4
White Females	9	6	9
Other Females	1	*	*
Totals	27	15	13
Percentage that are Black Females	63.0%	60.0%	30.8%

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	40	19	35
Black Females	17	9	4
Totals	57	28	39
Percentage that are Black Males	70.2%	67.9%	89.7%

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Gary

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	152	104	154
White Males	12	9	9
Other Males	5	*	*
Totals	169	113	163
Percentage that are Black Males	89.9%	92.0%	94.5%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	51	16	15
White Females	5	3	2
Other Females	0	*	*
Totals	56	19	17
Percentage that are Black Females	91.1%	84.2%	88.2%

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	152	104	154
Black Females	51	16	15
Totals	203	120	169
Percentage that are Black Males	74.9%	86.7%	91.1%

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Indianapolis

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	426	320	386
White Males	673	668	983
Other Males	32	30	20
Totals	1,131	1,018	1,391
Percentage that are Black Males	37.7%	31.4%	27.9%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	149	86	56
White Females	83	36	43
Other Females	7	0	1
Totals	239	122	100
Percentage that are Black Females	62.3%	70.5%	56.0%

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	426	320	388
Black Females	149	86	56
Totals	575	406	444
Percentage that are Black Males	74.1%	78.8%	87.4%

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Jeffersonville

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	5	7	*
White Males	16	14	18
Other Males	*	*	20
Totals	21	21	38
Percentage that are Black Males	23.8%	33.3%	38.0%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	4	3	*
White Females	3	0	2
Other Females	*	*	1
Totals	7	3	3
Percentage that are Black Females	57.1%	100.0%	N/A

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	5	7	*
Black Females	4	3	*
Totals	9	10	N/A
Percentage that are Black Males	55.6%	70.0%	N/A

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Michigan City

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	14	15	5
White Males	14	15	14
Other Males	*	*	20
Totals	28	30	39
Percentage that are Black Males	50.0%	50.0%	12.8%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	6	7	2
White Females	2	2	0
Other Females	*	*	1
Totals	8	9	3
Percentage that are Black Females	75.0%	77.8%	66.7%

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	14	15	5
Black Females	6	7	2
Totals	20	22	7
Percentage that are Black Males	70.0%	68.2%	71.4%

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Muncie

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	12	7	*
White Males	34	27	41
Other Males	*	*	20
Totals	46	34	61
Percentage that are Black Males	26.1%	20.6%	N/A

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	4	1	*
White Females	7	2	4
Other Females	*	*	1
Totals	11	3	5
Percentage that are Black Females	36.4%	33.3%	N/A

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	12	15	*
Black Females	4	7	*
Totals	16	22	*
Percentage that are Black Males	75.0%	68.2%	N/A

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

South Bend

Male Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	43	28	39
White Males	64	48	84
Other Males	*	9	*
Totals	107	85	123
Percentage that are Black Males	40.2%	32.9%	31.7%

Female Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Females	16	14	4
White Females	8	5	6
Other Females	*	1	*
Totals	24	20	10
Percentage that are Black Females	66.7%	70.0%	40.0%

Black Population

	Living W/HIV	Living W/AIDS	Died W/AIDS
Black Males	43	28	39
Black Females	16	14	4
Totals	59	42	43
Percentage that are Black Males	72.9%	66.7%	90.7%

Note: Totals and Percentages are reflective of numbers given

Source: Indiana State Department of Health

*Denotes unknown quantities including zero

Indiana Cumulative Statistics for Black Males In Surveyed Cities

	Living W/HIV	Living W/AIDS	Died W/AIDS
<i>Comparison</i>			
Black Males Total	721	519	638
Statewide Total	2,164	1,752	2,260
Percentages that are Black Males	33.3%	29.6%	28.2%

Black Population

Black Males Total	721	519	638
Black Population Total	976	656	717
Percentages that are Black Males	73.9%	79.1%	89.0%

** All state data is as of April 1, 2001*

Did you know?

- **AIDS is now the world's number one killer**, surpassing malaria and tuberculosis (United Nations AIDS Program, Nov. 23, 1998).
- In the United States, AIDS remains the leading cause of death for **male African Americans** between the ages of 25 and 44. In the same age category, AIDS is the second leading cause of death for African American females ("AIDS Epidemic Update-December 1998," UNAIDS; "HIV/AIDS and Women in the United States," CDC, July 1997; NYT, June 29, 1998).
- A recent study of trends in HIV **incidence among young people** in the United States found that, although blacks and Hispanics comprised just 27 percent of the U. S. population born during the years studied (1965 to 1974), they accounted for two-thirds of the HIV infections during 1992. (JAMA, June 17, 1998; NYT, June 29, 1998).
- **African Americans** make up 13 percent of the U. S. population but constitute 57 percent (8,136) of **new HIV infections** and 63 percent of new infections among people ages 13 to 24 in 1997. Hispanics make up 9 percent of the U. S. population and 8 percent of new HIV infections (1,122). Whites make up 76 percent of the U. S. population and 34 percent of new HIV infections (4,879) (HIV/AIDS Surveillance Report, CDC, Year-end Edition 1997; U. S. Census, 1990).
- 1994 was the first year when **African Americans** and **Hispanics** together accounted for the **majority** (53 percent) of AIDS cases reported yearly among men (HIV/AIDS Surveillance Report, CDC, Year-end Edition, 1994).
- More than half of African Americans surveyed about AIDS issues say that AIDS is the most **urgent health problem** facing the nation today. They indicated that they fear becoming infected with HIV and more information about testing is needed. A number of respondents said they needed help talking to partners and with children about AIDS and AIDS prevention. (National Survey of African Americans on HIV/AIDS, Henry J. Kaiser Foundation, March 1998).
- There are a total of 47 Hispanic males and females living with HIV in the surveyed cities.
- 28 of the 41 (68.3%) Hispanic males living with HIV are between the ages of 20-39 years old.
- There are a total of 51 Hispanic males and females living with AIDS in the surveyed cities.
- 96.1% (49 out of 51) of the Hispanic population living with AIDS are males.

HIV/AIDS Centers (Statewide)

Allen County

Allen County Health Dept.	(219) 449-7504
Fort Wayne Women's Bureau	(219) 424-7977
Up the Stairs Center	(219) 744-1199
AIDS Task Force	(219) 744-1144
Neighborhood Health Services (prenatal only)	(219) 458-2461
Matthew 25 Clinic	(219) 426-3250
Ask Ministries (Spanish)	(219) 744-9540
Project Ben (schedules appointments)	(219) 449-7504
Charis House	(219) 426-8123

Clark County

Clark County Health Dept.	(812) 288-2706
Women-To-Women	(812) 288-2704

Delaware County

Delaware County Health Dept.	(765) 747-7723
Ball State University	(765) 285-1067

Lake County

Gary City Health Dept.	(219) 882-5565
Project Precinct-Prenatal	(219) 887-5146
Aliveness Project	(219) 882-2453

LaPorte County

Laporte County Health Dept. —LaPorte Office	(219) 873-7001
LaPorte County Health Dept. —Michigan City Office	(219) 874-3755

Madison County

Madison County Health Dept.	(765) 646-9205
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Marion County

Infectious Disease Clinic	(317) 221-8307
Bell-Flower Clinic	(317) 221-8300
Outreach Project/ Martin Center	(317) 927-5151
Midtown Methadone	(317) 686-5634
Club Indianapolis	(317) 635-5796
Concord Community Center	(317) 637-4376
Planned Parenthood NW Clinic	(317) 876-1774
Planned Parenthood SE Clinic	(317) 788-0396
Planned Parenthood Midtown	(317) 925-6747
Planned Parenthood, Avon	(317) 272-2042
Damien Center	(317) 632-0123
Indiana Minority Health Coalition	(317) 926-4011

St. Joseph County

St. Joseph County Health Dept.	(219) 235-9725
Lasalle-Fillmore Center	(219) 235-9575
St. Joseph's Health Center	(219) 232-4070
AIDS Ministries/AIDS Assist	(219) 234-2870
Indiana Health Clinic (YWCA)	(219) 234-9033

Vanderburgh County

Vanderburgh County Dept. of Public Health	(812) 435-5683
Drug Crisis Referral Center	(812) 464-7710
Planned Parenthood	(812) 473-4990

Problem Statement:

Black males do not seek treatment due to the lack of adequate health insurance and high medical cost.

Community Action:

Local Urban Leagues, NAACP chapters, Minority Health Coalitions, and other community agencies should develop programs encouraging Black males to seek treatment and monitor health care facilities to ensure that they are user friendly.

School Corporations should develop in-school health centers to monitor the health of Black males throughout the public school system.

Legislation:

The Indiana General Assembly should:

1. Fund public health departments in urban cities to the level necessary to permit required periodic testing and annual examinations for African-Americans,
2. Fund and support a program encompassing the Universal Health Care concept, and
3. Financially support the further development of the activities of the Office for Prevention within the Indiana State Department of Health with a mandate to focus on health problems of the Black male.

The inability to pay for health care services is one of the major barriers to an individual accessing the health care system. Indiana does not have an adequate program for financing health care for the medically indigent, a large percentage of which are Black males. Individuals with preexisting health conditions and those individuals who are uninsured or underinsured may postpone treatment until the disease has progressed to a chronic state. This may result in an increase in mortality from preventable conditions.

Problem Statement:

There is a need to develop healthier life-styles and diets for Black males.

Community Action:

School corporations should develop programs to teach Black males how to maintain healthier life-styles.

School corporations and community agencies should develop programs to enhance the ability of the Black male to be a responsible health care consumer and maintainer of his own health.

Local Urban Leagues, Minority Health Coalitions and other community organizations should develop programs to address the poor nutritional patterns and diets of Black males.

Legislation:

The Indiana General Assembly should:

1. Fund community projects to aid the development of healthier life-styles among Black males, addressing prevention, early intervention, treatment and rehabilitation, and
2. Provide appropriate funds for local health departments so they can provide extended services to Black males.

Frank O'Bannon
Governor

Indiana Commission on The Social Status of Black Males

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